IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant

Bruce C. Johnson

Serial No.

08/615,814

Filed

: March 14, 1996

For

NASAL DILATOR

Docket No.

C348.12-0011

Group Art Unit: 3515

Examiner: K. Asher

CERTIFICATION OF TELEFACSIMILE TRANSMISSION

Assistant Commissioner for Patents

Washington, D.C. 20231

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2 1997 MAT

Sir:

GROUP 3300

I certify that the following papers are being telefacsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

> Letter. 1.

> > KINNEY & LANGE, P.A.

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6 PAGES - INCLUDING COVER PAGE

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FEE CALCULATION SHEET (AMENDMENT AFTER FINAL)

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MAI

Group Art Unit: 3312

Examiner: K. Asher

: 1997

Sir:

The fees due for filing this Amendment After Final are calculated as follows: No additional fee is required.

GROUP 3300

Small entity status of this application under 37 CFR §§ 1.9 and 1.27 is established by a verified statement.

(Col. 1)		(Col. 2)	(Col. 3)	Small Entity			Large Entity		
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	OR	Rate	Add'l Fee
Total	* 16	Minus	** 22	= 0	x 11 =	\$		x 22 =	\$
Indep.	* 6	Minus	+++ 6	= 0	x 40 =	\$		x 80 =	\$
First Presentation of Multiple Dep. Claim				+130=	\$		+260=	\$	
A A A A A A A A A A A A A A A A A A A			TOTAL		\$		Total	\$	

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "highest number previously paid for" in this space is less than 20, write "20" in this space.

If the "highest number previously paid for" in this space is less than 3, write "3" in this space. The "highest number previously paid for" (total or independent" is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

_	Please charge Deposit Account No. 11-0982 in the amount of \$	·	, A	A duplicate copy of this sheet is enclosed	

A check in the amount of \$ is enclosed.

X The Commissioner is authorized to charge payment of any patent application processing or filing fees under 37 CFR §§ 1.16 and 1.17 or credit any overpayment to Deposit Account No. 11-0982. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

KINNEY & LANGE

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